PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Boy 1450

Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRUCTIONS: The form should be used for transmitting the ISSUE HEE and PRINLONTEON HEE (if required, Blocks I through 5 should be completed when appropriets. All further correspondence including the Heart, devance orders and notification of maintenance few will be mailed to the current correspondence and indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance few notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

2292 7590 07/19/2011

BIRCH STEWART KOLASCH & BIRCH , LLP PO BOX 747

FALLS CHURCH, VA 22040-0747

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Feeds () Transmission

I hereby certify that this Feeds() Transmital is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (5/1) 273-2885, on the date indicated below.

			Г				(Depositor's name)
							(Signature)
							(Date)
APPLICATION NO.	FILING DATE	FILING DATE		FIRST NAMED INVENTOR		Y DOCKET NO.	CONFIRMATION NO.
10/578,517	10/578,517 05/08/2007		Kenji Ota		0020-5483PUS1		1726
TITLE OF INVENTION	: TAPE DRIVE WITH	CARTRIDGE THICKNE	ESS DETECTING SENSOR	ts			
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE TO		OTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0		\$1810	10/19/2011
EXAM	IINER	ART UNIT	CLASS-SUBCLASS				
GARCIA, CARLOS E		2627	360-090000				
1. Change of corresponde CFR 1.363).	ence address or indicatio	n of "Fee Address" (37	2. For printing on the p				
Change of correspondence address (or Change of Corresponden Address form PTO/SB/122) attached.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,				
Address in Pro/SB/123 attached. Thee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3				
PTO/SB/47; Rev 03-0 Number is required.	02 or more recent) attach	ed. Use of a Customer	2 registered patent attorneys or agents. If no name is 3			3	
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or typ	ne)			
PLEASE NOTE: Uni	less an assignee is ident h in 37 CFR 3.11. Com-	ified below, no assignee	data will appear on the p or a substitute for filing an	atent. If an assigne	e is identi	fied below, the do	cument has been filed for
(A) NAME OF ASSI		(B) RESIDENCE: (CITY and STATE OR COUNTRY)					
Hitachi Maxell, Ltd.			Ibaraki-shi, Osaka, Japan				
Please check the appropr	iate assignee category or	r categories (will not be p	rinted on the patent):	Individual 🖾 Co	rporation o	r other private gro	up entity Government
4a The following fee(s)	ore submitted		b Decement of Foods's (Blac	or God months on		lu poid isono foo	harm abarra)
4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee sh I save Fee A check is enclosed.						adona above)	
	io small entity discount p	Payment by credit card, Form PTO-2038 is attached.					
Advance Order - # of Copies			☼ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number <u>02-2448</u> (enclose an extra copy of this form).				
5. Change in Entity Sta			D				
	s SMALL ENTITY state		b. Applicant is no lon				
interest as shown by the	records of the United Sta	ites Patent and Trademar	ed from anyone other than t k Office.	ne appucant; a regis	sicred autor	ney or agent; or th	e assignee or other party in
Authorized Signature	15h			Date	SEP :	2 2 2011	
Typed or printed name John W. Bailey				Registration N	o32	,881	
This collection of inform	ation is required by 37 C	FR 1.311. The informati	on is required to obtain or a	etain a benefit by th	ne public w	hich is to file (and	by the USPTO to process)
an application. Confiden	tiality is governed by 35 d application form to the	U.S.C. 122 and 37 CFR USPTO. Time will var	on is required to obtain or r 1.14. This collection is est y depending upon the indiv he Chief Information Office COMPLETED FORMS TO	imated to take 12 n	mments on	the amount of tin	g gathering, preparing, and ne you require to complete
Box 1450, Alexandria, V	ions for reducing this bu	NOT SEND FEES OR	COMPLETED FORMS TO	THIS ADDRESS.	SEND TO	Omce, U.S. Depa Commissioner f	or Patents, P.O. Box 1450.

Alexandria, Virginia 22313-1450.

Under the Panerwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.